

OCT 21 2002

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Box ISSUE FEE

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CURRENT CORRESPONDENCE ADDRESS (From Legacy File--With any corrections or add'ns)

7590 10/07/2002

DAVID NEWMAN CHARTERED
Centennial Square
P.O. Box 2728
La Plata, MD 20646-2728

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DAVID B. NEWMAN
Newell B. Newman
October 15, 2002

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/729,911	12/06/2000	Donald L. Schilling	LINXBUS	7474

TITLE OF INVENTION: DISTRIBUTED NETWORK, SPREAD-SPECTRUM SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$7640	\$300	\$1580	01/07/2003
EXAMINER	ART UNIT	Applicant is	CLASS-SUBCLASS	SMALL ENTITY	DAVID B. NEWMAN
VO, DON NGUYEN	2631	375-130000			CHARTERED

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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3. "Fee Address" indication or "Fee Address" indication form PTO/SB/47; Rev 02-02 (or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Linex Technologies, Inc.

West Long Branch, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies

TEN (10)

 The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 140783 (enclose an extra copy of this form).

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David B. Newman
October 15, 2002

(Date)

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